

37218
Rec'd PCT/PTO 17 DEC 2004

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PTO/SB/01 (8-96)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number	SERVIER 436 PCT
First Named Inventor	
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

3-(4-oxo-4H-chromen-2-yl)-(1H)-quinolin-4-one compounds

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

06/18/2003

as United States Application Number or PCT International

Application Number PCT/FR2003/001849 and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02.07536	FRANCE	06.19.2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Customer Number 25,666**

Name	Registration Number	Name	Registration Number
G. PATRICK SAGE	37,710	MICHELE CUDAHY	55,093

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

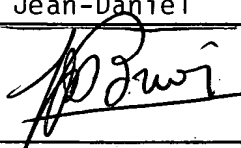
Direct all correspondence to:

Name	THE FIRM OF HUESCHEN AND SAGE		
Address	500 COLUMBIA PLAZA		
Address	350 EAST MICHIGAN AVENUE		
City	KALAMZZOO	State	MI
Country	USA	Telephone	269 382 0030
		Fax	269 3822030

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	Jean-Daniel	Middle Initial		Family Name	BRION	Suffix e.g. Jr.	
Inventor's Signature	 J.D. BRION				Date	December 3, 2004	
Residence: City	SAINT LEU LA FORET	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address	76, rue du Chateau						
Post Office Address							
City	SAINT LEU LA FORET	State	FR	Zip	95320	Country	FRANCE

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name	Lucien	Middle Initial		Family Name	ISRAEL	Suffix e.g. Jr.	
------------	--------	----------------	--	-------------	--------	--------------------	--

Inventor's Signature	<i>[Signature]</i> ISRAEL LUCIEN	Date	December 3, 2004
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Residence: City	PARIS	State	FR	Country	FRANCE	Citizenship	FR
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Post Office Address	36, rue du Mont Thabor
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Post Office Address	
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City	PARIS	State	FR	Zip	75001	Country	FRANCE
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name	Alain	Middle Initial		Family Name	LE RIDANT	Suffix e.g. Jr.	
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Inventor's Signature	<i>[Signature]</i> LE RIDANT ALAIN	Date	December 3, 2004
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Residence: City	NEUILLY SUR SEINE	State	FR	Country	FRANCE	Citizenship	FR
-----------------	-------------------	-------	----	---------	--------	-------------	----

Post Office Address	47-47 Bis boulevard du Commandant Charcot
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Post Office Address	
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City	NEUILLY SUR SEINE	State	FR	Zip	92200	Country	FRANCE
------	-------------------	-------	----	-----	-------	---------	--------

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name	Catherine	Middle Initial		Family Name	HARPEY	Suffix e.g. Jr.	
------------	-----------	----------------	--	-------------	--------	--------------------	--

Inventor's Signature	<i>[Signature]</i> HARPEY Catherine	Date	December 3, 2004
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Residence: City	PARIS	State	FR	Country	FRANCE	Citizenship	FR
-----------------	-------	-------	----	---------	--------	-------------	----

Post Office Address	135, rue du Ranelagh
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Post Office Address	
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City	PARIS	State	FR	Zip	75016	Country	FRANCE
------	-------	-------	----	-----	-------	---------	--------

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name	Cherif	Middle Initial		Family Name	RABHI	Suffix e.g. Jr.	
------------	--------	----------------	--	-------------	-------	--------------------	--

Inventor's Signature	<i>[Signature]</i> RABHI CHERIF	Date	December 3, 2004
----------------------	---------------------------------	------	------------------

Residence: City	LES LILAS de Paris	State	FR	Country	FRANCE	Citizenship	FR
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Post Office Address	163, rue de Paris
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Post Office Address	
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City	LES LILAS	State	FR	Zip	93260	Country	FRANCE
------	-----------	-------	----	-----	-------	---------	--------

<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto
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ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given
Name

El Bachir

Middle
Initial

Family
Name

KALOUN

Suffix
e.g. Jr.

Inventor's
Signature

EL Bachir KALOUN *[Signature]*

Date

December 3, 2004

Residence:
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Citizenship

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Post Office Address

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State

FR

Zip

95800

Country

FRANCE

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given
Name

Middle
Initial

Family
Name

Suffix
e.g. Jr.

Inventor's
Signature

Date

Residence:
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given
Name

Middle
Initial

Family
Name

Suffix
e.g. Jr.

Inventor's
Signature

Date

Residence:
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Country

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Name

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e.g. Jr.

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Residence:
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City

State

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